TRUTH SQUAD 2016

RECEIVED FEC MAIL CENTER 2015 JUL 24 AM 8: 04

12900 NE 180TH STREET #235

BOTHELL, WA 98011

Federal Election Commission

999 E Street, N.W.

Washington, D.C. 20463

Re: Form 1, Amended Statement of Organization— Bank Account Information

To Whom It May Concern:

This committee opened a bank account on July 14, 2015 and this amended statement of organization provides the required information regarding the bank where the account is held per the FEC's request.

Respectfully submitted,

Mark Lamb

Treasurer

2015 - 07 - 24 - 08 - 00018061

FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2015 JUL 24 AM 8: 04

				0	ffice Use Only
NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
TRUITIH SIQUAL) Z	0,1,6, , , ,			
ADDRESS (number and street)	1,2	9,00, NE	1,8,0,+, Sitire	e + # 23	5
☐ (Check if address is changed)					
	Bo	th e 1 1		WA 9. STATE ▲	80,2,1 - ZIP CODE A
COMMITTEE'S E-MAIL ADDRE	:SS				
(Check if address is changed)	lin	foetrut	h, S, 9, U, A, D, 2, O, 1, 6	CIOIM	
22	Option	nal Second E-Mail Add	dress		
	in	ficientruit	16 5 9 10 1A 10 12 10 1 1 6	1.1C101M	
COMMITTEE'S WEB PAGE AD	DRESS	(URL)			
☐ < (Check if address is changed)	MM	Withouth	15,9,0,A,D,2,0,1,6.	COM	
• ,	1.				
	<u></u>			 	
2. DATE () 1	<u>3</u> '[2015			
3. FEC IDENTIFICATION N	UMBER	▶ Co	0.5.79.24.3		
4. IS THIS STATEMENT	NE	EW (N) OR	AMENDED (A)	·	
I certify that I have examined t	his State	ment and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of Treasure	er <u>V</u>	1 ork Lam	. b		
Signature of Treasurer	$\overline{\mathcal{N}}$			Date 0.8	
NOTE: Submission of false, error			may subject the person signing		e penalties of 52 U.S.C. §30109
Office Use			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

Page 2

FEC Form 1 (Revised 02/2009)

(a)		This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name Cand								
Cand Party	idate Affiliati	Office Sought: House Senate President District						
(c)	3	This committee supports opposes only one candidate, and is NOT an authorized committee.						
Name Cand		MIKE HUCKABFE						
Part	y Con	nmittee:						
(d)		(National, State (Democratic, rhis committee is a or subordinate) committee of the Republican, etc.) Party.						
Poli	Political Action Committee (PAC):							
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:						
		Corporation Corporation w/o Capital Stock Labor Organization						
		Membership Organization Trade Association Cooperative						
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Join	t Func	Iraising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
Committees Participating in Joint Fundraiser								
	1.	FEC ID number						
	2.	FEC ID number						
	3.	FEC ID number						
	4.	FEC ID number						

FEC Form 1 (Revis	sed 02/2009)	Page 3
Write or Type Committee N		
TROTH SQ	VAD 2016	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
None		<u> </u>
Mailing Address		
,	CITY STATE	ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Representativ	
 Custodian of Records: books and records. 	Identify by name, address (phone number optional) and position of the personal	son in possession of committee
Full Name	r.K. Lamb,	1. 1. 1. 1. 1. 1. 1. 1.
Mailing Address	112900 NE 180+L St #235	
		<u> </u>
	Bothell wA	98011-
Title or Position	CITY STATE	ZIP CODE
Tireasivire	Telephone number	5-368-4238
8. Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the committee; a .g., assistant treasurer).	nd the name and address of
Full Name of Treasurer Ma	r.K. Lamb	
Mailing Address	11.29.00 NE 180+ h 15+ #1235	
	Bioithicili WA	9,8,0,2,1 -
Title or Position	CITY STATE	ZIP CODE
Treasporte	Telephone number 4.2	5 - 368 - 4238

9.

FEC Form 1 (Revise	ed 02/2009)		Page 4			
Full Name of Designated Agent	o, Karger,					
Mailing Address	12745 WaDIDISTOCK POAD					
		<u></u>				
	LOS Angelicis	CA STATE	ZIP CODE			
Title or Position	No. 1 and the second	12 ··	-6-1-12-2-2 B. 1. 0			
Carapan gn	Dis Irec + 10 () Telephone nu	mber [5]	P-666-9119			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Micilis Fairgo Bank, NA Mailing Address Ris 711 Signification of Bank Bank Bank Bank Bank Bank Bank Bank						
Mailing Address						
		ic A i				
	West Hollilywood	CA	9,0069-			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository,	etc.					
للللا		11111				
Mailing Address						
						
	CITY	STATE	ZIP CODE			

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Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

(3/2015)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS** Priority Mail Express Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED